

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO.

10732381

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		2				
3						
4	1					
5		1				
6	1					
7		1				
8	1					
9	1					
10	1					
11	1					
12	1					
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46						
47						
48						
49						
50						
TOTAL IND.	11					
TOTAL DEP.	5					
TOTAL CLAIMS	16					

	IND	DEP	IND	DEP	IND	DEP
51						
52						
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						